STATEMENT OF ORGANIZA	TION	OFFICE USE ONLY 1/3
Name and Address of Committee COMMITTEE TO ELECT JIMMY R FAIRCLOTH, JR 3709 MASONIC DRIVE	2. Date of this Statement 07/17/2009	5/0 7/22 0903890
ALEXANDRIA LA 71301	\$. Estimated Membership 10	3890
	4. Amended Statement?	Receipt
Check if new committee X	Yes <u>X</u> No	01444
6. All Committee Officers and Directors (Sichuding Chairperson, Treasurar, II	any, and any other committee	e Officiers and directors)
Position Name	Address	:
Chairperson		
Тгезсигы		
•		
6. Affiliated Organizations		Please see attached sheets.
(Any organization, other then a political committee, which directly or high	veutly established, administrati	ore or financially supports this committee.)
Name · Addres	i.	Relationship to Committee
		-
7. All Depositories for Committee Funds (committee funds must be deposite	d in one or more banks or savi	Please see altached sheets.
Nimas Addices		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: 1. G	ineck one: X Principal C	Please see attached sheets. ampaign Committee Subsidiary Committee
b. Name of Candidate	c. Office Sought by the Cand	
		Please stattached sheets.
9. Name of Person Preparing Report		Daylline Telephone Please attached shocts.
10. WE HEREBY CERTIFY that the Information contained in this STATE আৰু belief.	MENT OF ORGANIZATION	Is true and correct to the test of our knowledge information
Dated07 <u>/17/2009</u>		3 5€
MD F. Vlu	((318) NA 5 - 4 23 18 18 18 18 18 18 18 18 18 18 18 18 18
Signature of Committee Chairperson		Daytime Teleptionu Number
Mare of Many		318 442-1608
Signature of Committe Treesurer, If any Form 200, Rev 1/98		Daytime Yelephone Nismher

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	Affiliated Persons / Organizations	3/3	
	Name and Address of Chair Person MARK F VILAR 3709 MASONIC DRIVE	Candidate Information Office Sought (Include title of office as well as parish, city, lown action election district)	
	ALEXANDRIA LA 71301		
l		Name of Political Party:	
	Chairperson:	SUPPORTED OPPOSED by the Committee	
	Daytime Telephone Preparin' :	Relief Aff. Org. to Comm: CHAIRPERSON	
١	Name and Address of Treasurer	Candidate Information	
I	MARK S MCKAY 301 MALLARD COVE	Office Sought (Include titte of office as well as parish, City, town and/or election destrict)	
	PINEVILLE LA 71360		
I		Name of Political Party:	
I	Cheirpessor;	SUPPORTED OPPOSED by the Committee	
	Daytime Telephone (Preparer);	Rel at Aff. Org. to Commi: TREASURER	
	Name and Address of Candidate		
	JIMMY R FAIRCLOTH, JR	Candidate Information Office Spught (Include title of office as well es pensis, bity, town and/or election district)	
	4450 STILLMEADOW	STATE SUPREME COURT	
	PINEVILLE LA 71360		
		Name of Political Party:	
	Chaliperson:	☐ SUPPORTED ☐ OPPOSED by the CommMiles	
	Daytima Telephone (Preparer);	Rel of Aff. Drg. to Comm:	
	Name and Address of Parson Preparing Report	Candidate Information	
	MARK S MCKAY Office Sought (Inchete title of office as well as parish, city, town and/or election district)		
	PINEVILLE LA 71380		
		Name of Political Party:	
	Cheirparaun: SVPPORTED OPPOSED by the Committee		
	Daytime Telephone (Preparer): 318 442 1608	Roll of Aff. Org. to Comin: PREPARER	
	Name and Address of Financial Institution RED RIVER BANK	Candidate Information	
	1412 CENTRE CT	Office Sought (include little of office as well as parish, city, town and/or election district)	
	ALEXANDRIA LA 71301		
	W.000 FV 1201	Non-Aparticular	
		Name of Political Perly:	
	Chairperson:	SUPPORTED OPPOSED by the Committee	
	Deytine Telephone (Preparer):	Rei of AK. Org. to Comm: FINANCIAL INSTITUTION	
	Name and Address of Subsidiary Committee NOT APPLICABLE	Candidate Information Office Sound Include title of office as well	
	· · · · · · · · · · · · · · · · · · ·	Office Sought (Include title of office as well as pansh, city, town and/or election district)	
		Name of Political Party:	
	- Chairperson:	SUPPORTED POSED by the Committee	
	Deylima Tolaphano (Praparar):	Rol of Alf. Drg. to Comm; AFFILIATED ORGANIZATION/NA	
		The second secon	

The following certification is OPTIONAL and should be completed ONLY if it is applicable to your committee. Completion of this certification doubles the normal limitations on the amounts of contributions to candidates that are otherwise applicable to political committees.

Dated			
	Signature of Committee Chairperson		
	Signature of Committee Tredetizer, it any		

INSTRUCTIONS FOR COMPLETION OF STATEMENT OF ORGANIZATION

- A \$100 filling fee must accompany this form. The fee should be paid with a committee check payable to 'Campaign Finance.'
- This form must be filed every year between January 1 and January 31, subject to the following exceptions:
 - -if a committee organizes after January 31, then this form must be filed within 10 days of the date of organization.
 - -if the committee organizes within 10 days prior to an election, then this form must be filed within 3 days of the date of organization.
 - -if the committee does not anticipate that it will have over \$500 in total financial activity for a particular calendar year, it is not required to file this form (or that year, if it determines later in that year that it will exceed \$500 in total financial activity then this form must then be filed within 10 days.
- 3. Committee names must comply with the following rules:
 - -The name cannot be the same as or deceptively similar to the name of another political committee.
 - -if the committee supports only one candidate, the committee name must contain the name of that candidate.
 - -if the committee supports more than one candidate, the committee name cannot contain the name of an individual unless the committee name clearly reflects that the committee is not supporting or opposing only that individual.
 - -if the committee uses an acronym in addition to its complete name, place the acronym in parentheses after the complete name.
 - -if the committee name contains a number, spell out the number in the name and place the numerical symbol(s) in parentheses.
- Items 1-7 on the form must be completed. If the committee has no affiliated organization, then item 6 should be marked.
 Not Applicable(N/A). Items 9 and 10 must also be completed.
- Item 6 should be completed only if this committee supports a single candidate. If this item is completed, there must be a Statement of Designation completed by the candidate or his principal campaign committee already on file with this office or accompanying this form.
- 6. Any change in this Information reported on this form that occurs before the committee's next Statement of Organization is otherwise due must be reported by filing an Amended Statement of Organization within 10 days following the change. No filing fee is required for the filing of such an amendment.
- A Certificate of Registration will be issued to each properly organized committee.
- 8. A committee that has over \$500 of financial activity in a calendar year and does not file a Statement of Organization is subject to fines.
 LOUIS!ANA BOARD OF ETHICS
- 9. Mail or hand deliver to:

SUITE 200 8401 UNITED PLAZA BLVD. BATON ROUGE, LA 70809